2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 17, 2006 08:00 AM Secretary of State **DOCUMENT # P97000030098** t. Entity Name DOMINGO SEAT COVER INC. Principal Place of Business Mailing Address 9805 NW 80TH AVE 9805 NW 80TH AVE UNIT 13 G UNIT 13 G HIALEAH GARDENS, FL 33016 HIALEAH GARDENS, FL 33016 01192006 No Cho-P CR2E034 (11/05) Applied For 4. FEI Number 65-0744954 Not Applicable \$8.75 Additional 5. Certificate of Status Desked Fee Required 6. Name and Address of Current Registered Agent PEREZ, DOMINGO 3144 NW 99 ST. MIAMI, FL 33147 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SiGNATUITE Signature, typod or printed name of registered agent and title 4 applicable. (NOTE: Registered Agent agreture required when reinstaing) DATE . Election Cempaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 UUUUUNS12521 04/29/06-80093-009 150.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PEREZ, DOMINGO NAME 3144 NW 99 CT. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33147 TITLE HAME STREET ACCORESS CITY-ST-ZIP BILE NAME STREET ADDRESS CITY-ST-JP TITLE SALET STREET ADDRESS CTTY-ST-ZTP TITLE NAME STREET ADDRESS ध्राप-डा-यर TITLE NAME STREET ADDRESS 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same logal effect as if made under cath, that I am an offices or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if champed, or on an attachment with an address, with all other like empowered.

FILED

3-28-2006 Degime Priorie

PEREZ DOMINGO

OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: